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# TRANSMITTAL FORM

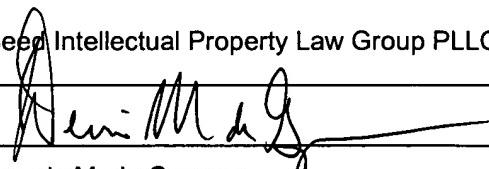
(To be used for all correspondence  
after initial filing)

	Application Number	09/164,504
	Filing Date	September 30, 1998
	First Named Inventor	Michael S. Kappes
	Art Unit	2665
	Examiner Name	Toan D. Nguyen
	Attorney Docket No.	210149.406

## ENCLOSURES (check all that apply)

- |   |  |  |
|---|--|--|
| <input type="checkbox"/> Fee Transmittal Form<br><input checked="" type="checkbox"/> Fee Attached<br><input type="checkbox"/> Amendment/Response<br><input type="checkbox"/> After Final<br><input type="checkbox"/> Affidavits/declaration(s)<br><input type="checkbox"/> Extension of Time Request<br><input type="checkbox"/> Express Abandonment Request<br><input type="checkbox"/> Information Disclosure Statement; Form PTO-1449<br><input type="checkbox"/> Cited References<br><input type="checkbox"/> Certified Copy of Priority Document(s)<br><input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53<br><input type="checkbox"/> Response to Missing Parts/Incomplete Application | <input checked="" type="checkbox"/> Drawing(s)<br><input type="checkbox"/> Request for Corrected Filing Receipt<br><input type="checkbox"/> Licensing-related Papers<br><input type="checkbox"/> Petition<br><input type="checkbox"/> Petition to Convert to a Provisional Application<br><input type="checkbox"/> Power of Attorney, Revocation, Change of Correspondence Address<br><input type="checkbox"/> Declaration<br><input type="checkbox"/> Statement under 37 CFR 3.73(b)<br><input type="checkbox"/> Terminal Disclaimer<br><input type="checkbox"/> Request for Refund<br><input type="checkbox"/> CD, Number of CD(s) _____<br><input type="checkbox"/> Landscape Table on CD | <input type="checkbox"/> After Allowance Communication to TC<br><input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences<br><input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief)<br><input type="checkbox"/> Proprietary Information<br><input type="checkbox"/> Status Letter<br><input checked="" type="checkbox"/> Return Receipt Postcard<br><input checked="" type="checkbox"/> Other Enclosure(s) (please identify below):<br><u>PTOL-85 (+ copy)</u><br><hr/> <hr/> <hr/> <hr/> |
|---|--|--|

Remarks 4 Sheets of Replacement Drawings, Figures 1-7.

SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	Seed Intellectual Property Law Group PLLC	Customer Number <b>00500</b>
Signature		
Printed Name	Dennis M. de Guzman	
Date.	September 2, 2005	Reg. No. 41,702

## CERTIFICATE OF TRANSMISSION/MAILING

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